

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

**10522341**

FILING DATE

**William A. Lando**  
**National Stage Processing**  
**Patented Specialist**  
**(703) 335-8421**

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3		/		/		
4		2		2		
5		0		1		
6		0		1		
7		0		0		
8		0		1		
9		0		1		
10		0		1		
11	/		/			
12	/		/			
13	/		/			
14		0		0		
15		0		1		
16		0		2		
17		0		2		
18		0		2		
19		0		0		
20		0		0		
21		0		2		
22				2		
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24				1		
25				1		
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TOTAL IND.	4		5			
TOTAL DEP.	17		33			
TOTAL CLAIMS	21		38			

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL DEP.						
TOTAL CLAIMS						